

10073027-021202

10073027-021202

NONPROVISIONAL PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OLIFF & BERRIDGE, PLC
P.O. Box 19928
Alexandria, Virginia 22320
Telephone: (703) 836-6400
Facsimile: (703) 836-2787

Attorney Docket No.: 111955

Date: February 12, 2002

BOX PATENT APPLICATION

Customer Number: 25944

**NONPROVISIONAL APPLICATION TRANSMITTAL
RULE §1.53(b)**

Director of the U.S. Patent and Trademark Office
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

For (Title): DIALYZING APPARATUS

By (Inventors): Keizoh KAWAGUCHI

- ☒ Formal drawings (Figs. 1-6; 6 sheets) are attached.
☐ Use Figure _____ for front page of Publication.
☒ A Declaration and Power of Attorney is filed herewith.
☒ This patent application is assigned to Colin Corporation.
☒ The executed Assignment is filed herewith.
☐ An Information Disclosure Statement is filed herewith.
☐ Entitlement to small entity status is hereby asserted.
☐ A Preliminary Amendment is filed herewith.
☐ Please amend the specification by inserting before the first line the sentence --This nonprovisional application claims the benefit of U.S. Provisional Application No. _____, filed _____.
☒ Priority of foreign application No. 2001-200822 filed July 2, 2001 in Japan is claimed (35 U.S.C. §119).
☒ A certified copy of the above corresponding foreign application(s) is filed herewith.
☐ This application is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing.
☒ The filing fee is calculated below:

**CLAIMS IN THE APPLICATION AFTER ENTRY OF
ANY PRELIMINARY AMENDMENT NOTED ABOVE**

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	15 - 20	= 0
INDEP CLAIMS	2 - 3	= 0
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED		

* If the difference is less than zero, enter "0".

**OTHER THAN A
SMALL ENTITY**

SMALL ENTITY

RATE	FEE
	\$ 370
x 9 =	\$
x 42 =	\$
+ 140 =	\$
TOTAL	\$ 370

RATE	FEE
	\$ 740
x 18	\$
x 84	\$
+ 280	\$
TOTAL	\$

- ☒ Check No. 127746 in the amount of \$370.00 to cover the filing fee is attached. Except as otherwise noted herein, the Director is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

James A. Oliff

James A. Oliff
Registration No. 27,075

Thomas J. Pardini
Registration No. 30,411

10073027-021202